Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF OREGON	-	
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this an amended filing

B 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Your full name		
Write the name that is on	Meta	Vance
, 0	First name	First name
example, your driver's	Ann	
,	Middle name	Middle name
	Bybee	Bybee
	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
your Social Security number or federal Individual Taxpayer Identification number	xxx-xx-2084	xxx-xx-2425
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. Bybee Last name and Suffix (Sr., Jr., II, III) All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number Meta First name Ann Middle name Bybee Last name and Suffix (Sr., Jr., II, III)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	■ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live	1653 Olympia Court, NW	If Debtor 2 lives at a different address:
		Salem, OR 97304 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Polk	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one:	Check one:
	bank upicy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	 Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Debtor 1 Meta Ann Bybee Debtor 2 Vance Bybee Case number (if known) Tell the Court About Your Bankruptcy Case Part 2: 7. Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under ☐ Chapter 7 ☐ Chapter 11 ☐ Chapter 12 Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? ☐ Yes. When District Case number When Case number District District When Case number 10. Are any bankruptcy ■ No cases pending or being ☐ Yes. filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? Relationship to you Debtor When Case number, if known District Debtor Relationship to you When District Case number, if known

Do you rent your

residence?

Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this

Go to line 12.

No. Go to line 12.

bankruptcy petition.

No.

☐ Yes.

	otor 1 Meta Ann Bybee otor 2 Vance Bybee			Case number (if known)			
Par	t 3: Report About Any Bu	sinesses	You Own as a Sole Proprie	tor			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.				
		☐ Yes.	Name and location of bus	siness			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any				
If you have more than one Sole proprietorship, use a separate sheet and attach it to this potition.							
	it to this petition.	on. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A))					
			Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))				
			Stockbroker (as defined in 11 U.S.C. § 101(53A))				
				er (as defined in 11 U.S.C. § 101(6))			
			☐ None of the above	• • • • • • • • • • • • • • • • • • • •			
				•			
13.	Are you filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate that you are a small business debtor, you must attach your most recent balance sheet, statement and federal income tax return or if any of these documents do not exist, follow the process of the pr						
	debtor? For a definition of small	■ No.	I am not filing under Cha	oter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter Code.	11, but I am NOT a small business debtor according to the definition in the Bankruptcy			
		☐ Yes.	I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bar				
Par	t 4: Report if You Own or	Have An	/ Hazardous Property or An	y Property That Needs Immediate Attention			
14.	Do you own or have any property that poses or is alleged to pose a threat of imminent and	■ No.	What is the hazard?				
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?				
	year -			Number, Street, City, State & Zip Code			

Debtor 1 Meta Ann Bybee Debtor 2 Vance Bybee

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

I have a mental illness or a Incapacity. mental deficiency that makes

me incapable of realizing or making rational decisions about finances.

My physical disability causes Disability. П

me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

П Active duty. I am currently on active military duty in a military

combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

My physical disability causes me to Disability.

be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty

in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

	tor 1 Meta Ann Bybee tor 2 Vance Bybee				Case numbe	「 (if known)
Part	6: Answer These Ques	tions for R	eporting Purposes			
16.	What kind of debts do you have?	16a.	Are your debts primarily c individual primarily for a per			ned in 11 U.S.C. § 101(8) as "incurred by ar
			☐ No. Go to line 16b.			
			■ Yes. Go to line 17.			
		16b.	Are your debts primarily b money for a business or inv			
			☐ No. Go to line 16c.			
			☐ Yes. Go to line 17.			
		16c.	State the type of debts you	owe that are not consu	mer debts or busines	s debts
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapte	er 7. Go to line 18.		
	Do you estimate that after any exempt property is excluded and		I am filing under Chapter 7. expenses are paid that fund			erty is excluded and administrative creditors?
	administrative expenses are paid that funds will be available for distribution to unsecured creditors?		□ No			
		d	☐ Yes			
18.	How many Creditors do you estimate that you owe?	1 -49		1 ,000-5,000)	2 5,001-50,000
		□ 50-99)	☐ 5001-10,000		☐ 50,001-100,000
		☐ 100-1 ☐ 200-9		☐ 10,001-25,0	000	☐ More than100,000
19.	How much do you	□ \$0 - \$	\$50,000	□ \$1,000,001	- \$10 million	☐ \$500,000,001 - \$1 billion
	estimate your assets to be worth?		001 - \$100,000	\$10,000,00		□ \$1,000,000,001 - \$10 billion
			,001 - \$500,000 ,001 - \$1 million		01 - \$100 million 001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
		— \$500	.,001 - \$1 million			
20.	How much do you	□ \$0 - \$		□ \$1,000,001		☐ \$500,000,001 - \$1 billion
	estimate your liabilities to be?		001 - \$100,000	□ \$10,000,00°		\$1,000,000,001 - \$10 billion
		■ \$100,001 - \$500,000 □ \$500,001 - \$1 million			1 - \$100 million 01 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
		⊅ 5000	J \$500,001 - \$1 million			— More than 900 billion
Part	7: Sign Below					
For	you	I have e	xamined this petition, and I de	eclare under penalty of	perjury that the inforr	nation provided is true and correct.
						under Chapter 7, 11,12, or 13 of title 11, close to proceed under Chapter 7.
			orney represents me and I did nt, I have obtained and read th			t an attorney to help me fill out this
		I reques	t relief in accordance with the	chapter of title 11, Unit	ted States Code, spe	cified in this petition.
			tcy case can result in fines up			or property by fraud in connection with a rears, or both. 18 U.S.C. §§ 152, 1341,
			a Ann Bybee		/s/ Vance Bybee	
			nn Bybee re of Debtor 1		Vance Bybee Signature of Debtor	2
		Execute			Executed on Dec	
			MM / DD / YYYY		MM	/ DD / YYYY

Debtor 1	Meta Ann Bybee	
Debtor 2	Vance Bybee	Case number (if kno

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Michae	el D. O'Brien	Date	December 9, 2015	
Signature of	Attorney for Debtor		MM / DD / YYYY	
Michael D	. O'Brien			
Printed name				
Michael D	. O'Brien & Associates, P.C.			
Firm name				
12909 SW	68th Parkway, Suite 160			
Portland,	OR 97223			
Number, Street,	City, State & ZIP Code			
Contact phone	503-786-3800	Email address	enc@pdxlegal.com	
951056				
Bar number & S	tato			

Fill i	n this info	ormation to identify your	case:				
Debte		Meta Ann Bybee					
Dobt	0	First Name	Middle Name	Last Name			
Debte	or 2 se if, filing)	Vance Bybee First Name	Middle Name	Last Name			
'			DISTRICT OF OREGO				
Unite	a States	Bankruptcy Court for the:	DISTRICT OF OREGO	JIN			
Case (if know	number wn)					_	if this is an
						amen	ded filing
Oπ:	ا ادادا	1000 · · · · ·					
		orm 106Sum	and Liabilities o	nd Cartain Statistical	Information		1045
				nd Certain Statistical e are filing together, both are ed			12/15
inforn	nation. F	ill out all of your schedul	es first; then complete t	the information on this form. If you the box at the top of this page	ou are filing amend		
Part	1: Sum	nmarize Your Assets					
						Your a	ssets
						Value o	f what you own
1.	Schedule	A/B: Property (Official Fo	orm 106A/B)			\$	419,400.00
							<u> </u>
	1b. Copy	line 62, Total personal pro	perty, from Schedule A/B	·······		\$	217,659.00
	1c. Copy	line 63, Total of all propert	y on Schedule A/B			\$	637,059.00
Part 2	2: Sum	nmarize Your Liabilities					
						Your li	abilities
						Amoun	t you owe
		D: Creditors Who Have Countries the total you listed in Column		ty (Official Form 106D) t the bottom of the last page of Pa	rt 1 of Schedule D	\$	435,356.00
		E/F: Creditors Who Have the total claims from Part		al Form 106E/F) ms) from line 6e of <i>Schedule E/F</i>		\$	0.00
	3b. Copy	the total claims from Part	2 (nonpriority unsecured	claims) from line 6j of Schedule E	/F	\$	6,070.00
					/a tatal liabilitiaa	•	444 400 00
				T	our total liabilities	\$	441,426.00
Part :	3: Sum	nmarize Your Income and	Expenses				
		I: Your Income (Official For combined monthly incom		le I		\$	6,910.00
		J: Your Expenses (Official r monthly expenses from li				\$	5,910.00
Part 4	4: Ans	wer These Questions for	Administrative and Stat	tistical Records			
6	Aro you f	iling for bankruptey und	or Chantors 7 11 or 133)			
	-	iling for bankruptcy under You have nothing to report	•	Check this box and submit this form	m to the court with yo	our other so	hedules.
7.	■ Yes What kin	d of debt do you have?					
				debts are those "incurred by an in 9g for statistical purposes. 28 U.S		a personal	, family, or
		r debts are not primarily court with your other sched		ave nothing to report on this part o	f the form. Check thi	s box and s	submit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

10,060.03

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clair	n
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

ast Name set fits in more than one cate together, both are equally resnal pages, write your name are Have an Interest In I, or similar property?	egory, list the asset in the o	orrect information. If). Answer every questi ns or exemptions. Put th
set fits in more than one cate together, both are equally res nal pages, write your name ar Have an Interest In	egory, list the asset in the c sponsible for supplying cond case number (if known)	amended filing 12/15 category where you th orrect information. If). Answer every questi
set fits in more than one cate together, both are equally res nal pages, write your name ar r Have an Interest In I, or similar property?	egory, list the asset in the c sponsible for supplying cond case number (if known)	amended filing 12/15 category where you thorrect information. If). Answer every quest
together, both are equally res nal pages, write your name ar Have an Interest In I, or similar property?	egory, list the asset in the c sponsible for supplying cond case number (if known)	amended filing 12/15 category where you th orrect information. If). Answer every questi ns or exemptions. Put th
together, both are equally res nal pages, write your name ar Have an Interest In I, or similar property?	egory, list the asset in the c sponsible for supplying cond case number (if known)	amended filing 12/15 category where you the orrect information. If). Answer every quest
together, both are equally res nal pages, write your name ar Have an Interest In I, or similar property?	egory, list the asset in the c sponsible for supplying cond case number (if known)	amended filing 12/15 category where you th orrect information. If). Answer every questi
together, both are equally res nal pages, write your name ar Have an Interest In I, or similar property?	sponsible for supplying condition case number (if known)	12/15 category where you the orrect information. If). Answer every quest
r Have an Interest In	Do not deduct secured claim	ns or exemptions. Put th
		•
а	Creditors Who Have Claims	
	entire property?	Current value of the portion you own?
rty	\$419,400.00	\$419,400.0
the property? Check (Describe the nature of you (such as fee simple, tenan a life estate), if known.	
	Fee simple	
· · · · · · · · · · · · · · · · · · ·	Check if this is comm	unity property
vish to add about this item, su	,	
v	btor 2 only se debtors and another	btor 2 only le debtors and another Check if this is comm (see instructions) wish to add about this item, such as local

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B

Schedule A/B: Property

		eta Ann By ance Bybe			Case number	er (if known)	
3. C	Cars, vans,	trucks, trac	tors, sport utility ve	ehicles, motorcycles			
Г] No						
	Yes						
3.1	1 Maka:	Volkswa	non	Who has an interest in the property? (1	back one Do no	ot deduct secured c	laims or exemptions. Put
3.	1 Make: Model:	Jetta	9011	Who has an interest in the property? Cl Debtor 1 only	tne a		ed claims on Schedule D: ims Secured by Property.
	Year:	2013		■ Debtor 2 only			, , ,
		nate mileage:	30,000	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only		ent value of the eproperty?	Current value of the portion you own?
		ormation:		☐ At least one of the debtors and anothe		- p p y -	,
	KBB- P	Private Par	ty- Good				
	Condit	ion		Check if this is community property (see instructions)		\$11,048.00	\$11,048.00
	xamples: Bi I No I Yes	oats, trailers	, motors, personal w	atercraft, fishing vessels, snowmobiles,	motorcycle accessori	es	
5 <i>I</i>	Add the do pages you	llar value of have attach	the portion you oved for Part 2. Write	vn for all of your entries from Part 2, i that number here	including any entries	s for =>	\$11,048.00
Part	2: Doserik	o Vour Borea	nal and Household Ite	ame			
Do	you own o	r have any l	egal or equitable in	nterest in any of the following items?			Current value of the portion you own? Do not deduct secured claims or exemptions.
				s, china, kitchenware			
	■ Yes. De	scribe	Household God \$200	ods and furnishings, no one item	worth more than		\$3,000.00
		including cel		leo, stereo, and digital equipment; comp nedia players, games	outers, printers, scann	ers; music collec	tions; electronic devices
			Electronic Item	s			\$1,000.00
		Antiques and other collecti	l figurines; paintings, ons, memorabilia, co	prints, or other artwork; books, pictures ollectibles	s, or other art objects;	stamp, coin, or b	paseball card collections;
	Examples: S	Sports, photo musical instr	•	nd other hobby equipment; bicycles, po	ol tables, golf clubs, s	kis; canoes and l	kayaks; carpentry tools;
10.	Firearms		s, shotguns, ammun	iition, and related equipment			

Official Form 106A/B Schedule A/B: Property

Debtor 1 Debtor 2			Case number (if known)	
□Ye	s. Describe			-
11. Clo tl				
Exa	mples: Everyday	clothes, furs, leather coats,	designer wear, shoes, accessories	
□ No	s. Describe			
- re	s. Describe	Clothing		\$600.00
12. Jew e	•	owolny postumo jowalny o	angagement rings, worlding rings, hoirloom jowelny watches, game	gold silver
□ No		ewelly, costume jewelly, e	engagement rings, wedding rings, heirloom jewelry, watches, gems,	gold, Silver
■ Ye	s. Describe			•
		Personal Jewelry		\$1,000.00
Exa. □ No	-farm animals mples: Dogs, cats	s, birds, horses		
		Two Family Dogs		\$0.00
	s. Give specific in			
		-	m Part 3, including any entries for pages you have attached	\$5,600.00
Part 4:	Describe Your Fina	ncial Assets		
Do you	own or have any	legal or equitable interes	st in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No	mples: Money you		ur home, in a safe deposit box, and on hand when you file your peti	tion
Exa.	institutions		accounts; certificates of deposit; shares in credit unions, brokerage ounts with the same institution, list each.	houses, and other similar
□ No ■ Ye	s		Institution name:	
		17.1.	US Bank, account ending #9448	\$2,200.00
		s, or publicly traded stock s, investment accounts wit	ks h brokerage firms, money market accounts	
■ No) :S	Institution or iss	suer name:	
19. Non-	-publicly traded s joint venture		corporated and unincorporated businesses, including an intere	st in an LLC, partnership,
		nformation about them Name of entity:	% of ownership:	

Official Form 106A/B Schedule A/B: Property

		Meta Ann Bybee Vance Bybee		Case number (if known)	
	Negotial Non-neg ■ No	ble instruments include personal che	ner negotiable and non-negotiable in icks, cashiers' checks, promissory note annot transfer to someone by signing c	es, and money orders.	
21.		ent or pension accounts	401(k), 403(b), thrift savings accounts,	or other pension or profit-sharing pla	nns
	□ No ■ Yes. Li	ist each account separately. Type of account: Pension	Institution name: Oregon PERS Tier	One and Tier Two	\$194,870.00
		IRA	John Hancock Inve	stments	\$3,941.00
22.	Your sha		made so that you may continue service aid rent, public utilities (electric, gas, w		s, or others
	☐ Yes		Institution name or indiv	vidual:	
23.	Annuitie No □ Yes		of money to you, either for life or for a iption.	number of years)	
24.		. §§ 530(b)(1), 529A(b), and 529(b)(nt in a qualified ABLE program, or unit). escription. Separately file the records o		am.
	Trusts, e		perty (other than anything listed in l	ine 1), and rights or powers exerci	isable for your benefit
26.	Example ■ No		crets, and other intellectual property s, proceeds from royalties and licensing		
	Example ■ No	s, franchises, and other general in es: Building permits, exclusive licens Give specific information about them	es, cooperative association holdings, I	iquor licenses, professional licenses	
M	oney or pr	roperty owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
	■ No	nds owed to you ive specific information about them,	including whether you already filed the	e returns and the tax years	
29.	■ No		pousal support, child support, mainten	ance, divorce settlement, property se	ettlement

Official Form 106A/B Schedule A/B: Property page 4

	btor 1 btor 2	Meta Ann Bybee Vance Bybee	Case number (if known)	
		amounts someone owes you les: Unpaid wages, disability insurance payments, disability benefits benefits; unpaid loans you made to someone else	s, sick pay, vacation pay, workers' compe	ensation, Social Security
		Give specific information		
		ts in insurance policies ples: Health, disability, or life insurance; health savings account (HSA)	A); credit, homeowner's, or renter's insura	nce
ı	□ Yes.	Name the insurance company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
1	If you a someo	Rerest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance has died. Give specific information	ance policy, or are currently entitled to rec	eive property because
ļ	<i>Examp</i> ■ No	against third parties, whether or not you have filed a lawsuit or oles: Accidents, employment disputes, insurance claims, or rights to Describe each claim		
- 1	No	contingent and unliquidated claims of every nature, including of Describe each claim	ounterclaims of the debtor and rights t	o set off claims
- 1	No	ancial assets you did not already list Give specific information		
36.		he dollar value of all of your entries from Part 4, including any eart 4. Write that number here	. • •	\$201,011.00
Par	t 5: Des	scribe Any Business-Related Property You Own or Have an Interest In. Lis	t any real estate in Part 1.	
_	_ ′	own or have any legal or equitable interest in any business-related propert	y?	
_	_	to Part 6. So to line 38.		
Par		scribe Any Farm- and Commercial Fishing-Related Property You Own or Fou own or have an interest in farmland, list it in Part 1.	lave an Interest In.	
46.	No.	own or have any legal or equitable interest in any farm- or com	nmercial fishing-related property?	
	⊔ Yes.	. Go to line 47.		Current value of the portion you own? Do not deduct secured claims or exemptions.
Par	t 7: Des	scribe All Property You Own or Have an Interest in That You Did Not List A	Above	
ı	Examp ■ No	have other property of any kind you did not already list? oles: Season tickets, country club membership Give specific information		

Official Form 106A/B Schedule A/B: Property page 5

	btor 1 Meta Ann Bybee			Case number (if known)	
Der	btor 2 Vance Bybee			Case number (# known)	
54.	Add the dollar value of all of your entries from F	art 7. Write th	at number here		\$0.00
Part	t 8: List the Totals of Each Part of this Form				
55.	Part 1: Total real estate, line 2				\$419,400.00
56.	Part 2: Total vehicles, line 5		\$11,048.00		
57.	Part 3: Total personal and household items, line	15	\$5,600.00		
58.	Part 4: Total financial assets, line 36	•	\$201,011.00		
59.	Part 5: Total business-related property, line 45		\$0.00		
60.	Part 6: Total farm- and fishing-related property,	ine 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	+	\$0.00		
62.	Total personal property. Add lines 56 through 61.		\$217,659.00	Copy personal property total	\$217,659.00
63.	Total of all property on Schedule A/B. Add line 5	5 + line 62			\$637,059.00

Fill in this inform	nation to identify your	case:		
Debtor 1	Meta Ann Bybee			
	First Name	Middle Name	Last Name	
Debtor 2	Vance Bybee			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	DISTRICT OF OREGON		
Case number				
(if known)				☐ Check if this is an
				amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

		•				
	☐ You are claiming state and federal nonban	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)		
	■ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)				
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.		
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
	2013 Volkswagon Jetta 30,000 miles	\$11,048.00		\$7,350.00	11 U.S.C. § 522(d)(2)	
	KBB- Private Party- Good Condition Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit		
	Household Goods and furnishings, no one item worth more than \$200	\$3,000.00		\$3,000.00	11 U.S.C. § 522(d)(3)	
	Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit		
	Electronic Items Line from Schedule A/B: 7.1	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(3)	•
	Line IIIII Schedule PVD. 7.1			100% of fair market value, up to any applicable statutory limit		
	Clothing	\$600.00		\$600.00	11 U.S.C. § 522(d)(3)	•
	Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit		

Official Form 106C

Personal Jewelry

Line from Schedule A/B: 12.1

Schedule C: The Property You Claim as Exempt

\$1,000.00

page 1 of 2

11 U.S.C. § 522(d)(4)

\$1,000.00

100% of fair market value, up to any applicable statutory limit

Debt Debt				Case number (if known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	US Bank, account ending #9448	\$2,200.00		\$2,200.00	11 U.S.C. § 522(d)(5)
	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
	Pension: Oregon PERS Tier One and	\$194,870.00		\$194,870.00	11 U.S.C. § 522(d)(10)(E)
	Line from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit	
	IRA: John Hancock Investments Line from Schedule A/B: 21,2	\$3,941.00		\$3,941.00	11 U.S.C. § 522(d)(10)(E)
'	LINE HOLL COLOURS AND, 21.2			100% of fair market value, up to any applicable statutory limit	
	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/16 and every 3 ■ No			iled on or after the date of adjustme	nt.)
	Yes. Did you acquire the property covere	d by the exemption w	ithin 1	.215 days before you filed this case	?

□ No □ Yes

Fill in this inform	nation to identify you	ır case:				
Debtor 1	Meta Ann Bybee					
Dobtor 2	First Name	Middle Name Last Nam	ie			
Debtor 2 (Spouse if, filing)	Vance Bybee First Name	Middle Name Last Nam	ie		-	
Linited Ctates Dan	len onto . Co out to a the o	DISTRICT OF ORECON				
United States Ban	kruptcy Court for the	DISTRICT OF OREGON			-	
Case number					☐ Check	if this is an
						ded filing
Official Form	106D					
Schedule I	D: Creditors	Who Have Claims Secu	red	by Propert	У	12/15
		f two married people are filing together, both are, number the entries, and attach it to this form. C				
1. Do any creditors h	nave claims secured by	your property?				
☐ No. Check	this box and submit t	his form to the court with your other schedul	es. You	u have nothing else	to report on this form.	
Yes. Fill in	all of the information	below.				
Part 1: List All	Secured Claims					
2. List all secured c	laims. If a creditor has m	nore than one secured claim, list the creditor separa	itely for	Column A	Column B	Column C
		articular claim, list the other creditors in Part 2. As a er according to the creditor's name.	nuch	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
	·	•		value of collateral.	claim	If any
2.1 Ditech Final Creditor's Name	ancial, LLC	Describe the property that secures the claim:		\$419,512.00	\$419,400.00	\$112.00
Creditor's Name		Holder of Note unknown; Apparent Servicing Agent for First Mortgage				
		on Residence at 1653 Olympia				
		Court, NW Salem, OR 97304 Polk				
•	y Department	County; Principal \$378,656; Arrears \$40.855	•			
PO Box 61		As of the date you file, the claim is: Check all that	l at			
Rapid City 57709-615		apply. ☐ Contingent				
Number, Street,	City, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the dek	ot? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as mortgage of	r secure	ed		
Debtor 2 only	-t 0 h	car loan) Statutory lien (such as tax lien, mechanic's lie	n)			
Debtor 1 and Deb	otor 2 only e debtors and another	☐ Judgment lien from a lawsuit	11)			
☐ Check if this cla		Other (including a right to offset)				
community deb			gage			
	September					
Date debt was incur	•	Last 4 digits of account number 87	18			
2.2 Exeter Fina				640.004.00	#44 P42 P2	*
Creditor's Name	on	Describe the property that secures the claim:		\$10,331.00	\$11,048.00	\$0.00
	s-Bankruptcy	2013 Volkswagon Jetta 30,000 miles, matures September 2019,				
Notice		interest rate of 13.70 %				
	olinas Blvd., W,	As of the date you file, the claim is: Check all the apply.	nt .			
Suite 1800	75039-5439	☐ Contingent				
	City, State & Zip Code	☐ Unliquidated				
		Disputed				
Who owes the dek	ot? Check one.	Nature of lien. Check all that apply.				
☐ Debtor 1 only ☐ Debtor 2 only		An agreement you made (such as mortgage of car loan)	r secure	ed		
■ Debtor 1 and Deb	otor 2 only	☐ Statutory lien (such as tax lien, mechanic's lie	n)			
_	e debtors and another	☐ Judgment lien from a lawsuit	,			
Official Form 106D		Schedule D: Creditors Who Have Claims	Secur	ed by Proporty		page 1 of 3
	•	Schedule D. Steuliols WIID Have Ciallis	occur	ca by rioperty		page 1 01 3

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page 1 of 3

Debtor 1 Meta Ann Byb	ee			Case	number (if know)		
First Name	Middle Na	ame	Last Name				
Debtor 2 Vance Bybee							
First Name	Middle Na	ame	Last Name				
☐ Check if this claim relates community debt	to a	Other (including	g a right to offset)	Purchase Money Security	_		
Date debt was incurred 20	ptember 14	Last 4 dig	ts of account number	5430			
2.3 Valley Credit Servi	ice, Inc	Describe the pro	perty that secures the	claim:	\$296.00	\$419,400.00	\$296.00
Creditor's Name		1653 Olympia	Court, NW Sale	m, OR			· ·
626 Appleblossom	ne	97304 Polk (, -			
Avenue, NE		As of the date ve	u file the eleim iou Ch	and all that			
PO Box 2046		apply.	u file, the claim is: Che	eck all that			
Salem, OR 97308		☐ Contingent					
Number, Street, City, State &	& Zip Code	□ Unliquidated					
		□ Disputed					
Who owes the debt? Check	one.		Check all that apply.				
Debtor 1 only		•	you made (such as mo	rtgage or secured			
Debtor 2 only		car loan)					
Debtor 1 and Debtor 2 only		Statutory lien (such as tax lien, mecha	anic's lien)			
At least one of the debtors a	and another	Judgment lien	from a lawsuit				
☐ Check if this claim relates	to a	Other (includin	g a right to offset)		_		
community debt							
community debt Date debt was incurred		Last 4 dig	ts of account number	2101			
Date debt was incurred West Hills Homeon	wners	Last 4 dig	its of account number	2101			
·	wners	<u> </u>	its of account number		\$5,217.00	\$419,400.00	\$5,217.00
Date debt was incurred 2 4 West Hills Homeov	wners	Describe the pro		claim:	\$5,217.00	\$419,400.00	\$5,217.00
Date debt was incurred 2.4 West Hills Homeovassociation	wners	Describe the pro	perty that secures the Lot 276 for prop a Court, NW Sale	claim:	\$5,217.00	\$419,400.00	\$5,217.00
Date debt was incurred 2.4 West Hills Homeovassociation	wners	Describe the pro HOA Dues or 1653 Olympia 97304 Polk O	perty that secures the	claim:	\$5,217.00	\$419,400.00	\$5,217.00
Date debt was incurred 2.4 West Hills Homeovassociation	wners	Describe the pro HOA Dues or 1653 Olympia 97304 Polk 0 \$5,217.46	perty that secures the Lot 276 for prop Court, NW Sale County; Arrears	claim: Derty at m, OR	\$5,217.00	\$419,400.00	\$5,217.00
Date debt was incurred 2.4 West Hills Homeovassociation Creditor's Name PO Box 5892	wners	Describe the pro HOA Dues or 1653 Olympia 97304 Polk 0 \$5,217.46	perty that secures the Lot 276 for prop a Court, NW Sale	claim: Derty at m, OR	\$5,217.00 <u> </u>	\$419,400.00	\$5,217.00
Date debt was incurred 2.4 West Hills Homeovassociation Creditor's Name	wners	Describe the product of the product	perty that secures the Lot 276 for prop Court, NW Sale County; Arrears	claim: Derty at m, OR	\$5,217.00	\$419,400.00	\$5,217.00
Date debt was incurred 2.4 West Hills Homeovassociation Creditor's Name PO Box 5892		Describe the pro HOA Dues or 1653 Olympia 97304 Polk (\$5,217.46 As of the date yo apply.	perty that secures the Lot 276 for prop Court, NW Sale County; Arrears	claim: Derty at m, OR	\$5,217.00	\$419,400.00	\$5,217.00
Date debt was incurred 2.4 West Hills Homeon Association Creditor's Name PO Box 5892 Salem, OR 97304 Number, Street, City, State &	& Zip Code	Describe the pro HOA Dues or 1653 Olympia 97304 Polk (\$5,217.46 As of the date yo apply. Contingent Unliquidated Disputed	perty that secures the Lot 276 for prop Court, NW Sale County; Arrears u file, the claim is: Cha	claim: Derty at m, OR	\$5,217.00	\$419,400.00	\$5,217.00
Date debt was incurred 2.4 West Hills Homeon Association Creditor's Name PO Box 5892 Salem, OR 97304 Number, Street, City, State &	& Zip Code	Describe the pro HOA Dues or 1653 Olympia 97304 Polk (\$5,217.46 As of the date yo apply. Contingent Unliquidated Disputed Nature of lien. (perty that secures then Lot 276 for propared Court, NW Sale County; Arrears utile, the claim is: Check all that apply.	claim: Derty at m, OR	\$5,217.00	\$419,400.00	\$5,217.00
Date debt was incurred 2.4 West Hills Homeon Association Creditor's Name PO Box 5892 Salem, OR 97304 Number, Street, City, State & Who owes the debt? Check Debtor 1 only	& Zip Code	Describe the pro HOA Dues or 1653 Olympia 97304 Polk (\$5,217.46 As of the date yo apply. Contingent Unliquidated Disputed Nature of lien. (C	perty that secures the Lot 276 for prop Court, NW Sale County; Arrears u file, the claim is: Cha	claim: Derty at m, OR	\$5,217.00	\$419,400.00	\$5,217.00
Date debt was incurred 2.4 West Hills Homeon Association Creditor's Name PO Box 5892 Salem, OR 97304 Number, Street, City, State & Who owes the debt? Check Debtor 1 only Debtor 2 only	& Zip Code	Describe the pro HOA Dues or 1653 Olympia 97304 Polk (\$5,217.46 As of the date yo apply. Contingent Unliquidated Disputed Nature of lien. (An agreement car loan)	perty that secures then Lot 276 for proparation in Court, NW Sale County; Arrears urfile, the claim is: Check all that apply.	claim: Derty at m, OR eck all that	\$5,217.00	\$419,400.00	\$5,217.00
Date debt was incurred 2.4 West Hills Homeon Association Creditor's Name PO Box 5892 Salem, OR 97304 Number, Street, City, State & Who owes the debt? Check Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	& Zip Code one.	Describe the pro HOA Dues or 1653 Olympia 97304 Polk (\$5,217.46 As of the date yo apply. Contingent Unliquidated Disputed Nature of lien. (An agreement car loan) Statutory lien (perty that secures then Lot 276 for proping Court, NW Sale County; Arrears utile, the claim is: Check all that apply. You made (such as mostuch as tax lien, mechanisms)	claim: Derty at m, OR eck all that	\$5,217.00	\$419,400.00	\$5,217.00
Date debt was incurred 2.4 West Hills Homeon Association Creditor's Name PO Box 5892 Salem, OR 97304 Number, Street, City, State & Who owes the debt? Check Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a	à Zip Code one.	Describe the pro HOA Dues or 1653 Olympia 97304 Polk () \$5,217.46 As of the date yo apply. Contingent Unliquidated Disputed Nature of lien. () An agreement car loan) Statutory lien () Judgment lien	perty that secures then Lot 276 for proping Court, NW Sale County; Arrears urfile, the claim is: Check all that apply. The check all that apply.	claim: Derty at m, OR eck all that	\$5,217.00	\$419,400.00	\$5,217.00
Date debt was incurred 2.4 West Hills Homeon Association Creditor's Name PO Box 5892 Salem, OR 97304 Number, Street, City, State & Who owes the debt? Check Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	à Zip Code one.	Describe the pro HOA Dues or 1653 Olympia 97304 Polk (\$5,217.46 As of the date yo apply. Contingent Unliquidated Disputed Nature of lien. (An agreement car loan) Statutory lien (perty that secures then Lot 276 for proping Court, NW Sale County; Arrears urfile, the claim is: Check all that apply. The check all that apply.	claim: Derty at m, OR eck all that	\$5,217.00	\$419,400.00	\$5,217.00
Date debt was incurred 2.4 West Hills Homeon Association Creditor's Name PO Box 5892 Salem, OR 97304 Number, Street, City, State & Who owes the debt? Check Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a Check if this claim relates community debt	and another to a	Describe the pro HOA Dues or 1653 Olympia 97304 Polk (\$5,217.46 As of the date yo apply. Contingent Unliquidated Disputed Nature of lien. (An agreement car loan) Statutory lien (Judgment lien Other (including	perty that secures then Lot 276 for proping Court, NW Sale County; Arrears urfile, the claim is: Check all that apply. Theck all that apply. Tyou made (such as mostuch as tax lien, mechang from a lawsuit	claim: Derty at m, OR eck all that rtgage or secured anic's lien)	\$5,217.00	\$419,400.00	\$5,217.00
Date debt was incurred 2.4 West Hills Homeon Association Creditor's Name PO Box 5892 Salem, OR 97304 Number, Street, City, State & Who owes the debt? Check Debtor 1 only Debtor 2 only At least one of the debtors a Check if this claim relates community debt	and another to a	Describe the pro HOA Dues or 1653 Olympia 97304 Polk (\$5,217.46 As of the date yo apply. Contingent Unliquidated Disputed Nature of lien. (An agreement car loan) Statutory lien (Judgment lien Other (including	check all that apply. you made (such as mostered as tax lien, mechafrom a lawsuit g a right to offset)	claim: Derty at m, OR eck all that rtgage or secured anic's lien)	\$5,217.00	\$419,400.00	\$5,217.00
Date debt was incurred 2.4 West Hills Homeon Association Creditor's Name PO Box 5892 Salem, OR 97304 Number, Street, City, State & Who owes the debt? Check Debtor 1 only Debtor 2 only At least one of the debtors a Check if this claim relates community debt	and another to a	Describe the pro HOA Dues or 1653 Olympia 97304 Polk (\$5,217.46 As of the date yo apply. Contingent Unliquidated Disputed Nature of lien. (An agreement car loan) Statutory lien (Judgment lien Other (includin	check all that apply. you made (such as mo such as tax lien, mecha from a lawsuit g a right to offset)	claim: Derty at m, OR eck all that rtgage or secured anic's lien)	\$5,217.00		\$5,217.00
Date debt was incurred 2.4 West Hills Homeon Association Creditor's Name PO Box 5892 Salem, OR 97304 Number, Street, City, State & Who owes the debt? Check Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a Check if this claim relates community debt Se Date debt was incurred 2.0	and another to a eptember 07	Describe the pro HOA Dues or 1653 Olympia 97304 Polk (\$5,217.46 As of the date yo apply. Contingent Unliquidated Disputed Nature of lien. (An agreement car loan) Statutory lien (Judgment lien Other (includin	cherty that secures the Lot 276 for proparation in Court, NW Sale County; Arrears utile, the claim is: Check all that apply. You made (such as mossuch as tax lien, mechange) a right to offset)	claim: Derty at m, OR eck all that rtgage or secured anic's lien)		00	\$5,217.00

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

page 2 of 3

Debtor 1	Meta Ann Bybee			Case number (if know)	
	First Name	Middle Name	Last Name		
Debtor 2	Vance Bybee				
	First Name	Middle Name	Last Name		
	me Address DNE-			On which line in Part 1 did you ent	ter the creditor?
				Last 4 digits of account number	

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

	ation to identify your	case:							
Debtor 1	Meta Ann Bybee								
Dahtar 2	First Name	Middle Name Las	st Name						
Debtor 2 (Spouse if, filing)	Vance Bybee First Name	Middle Name La:	st Name						
United States Ban	kruptcy Court for the:	DISTRICT OF OREGON							
Case number									
(if known)							Check	if this is	an
							amend	ed filing	
Official Forn	n 106E/E								
		Who Hove Unecourage	l Claima						4044
		Who Have Unsecured Part 1 for creditors with PRIORITY clain							12/15
1. Do any credi	itors have priority unsecu Part 2.	red claims against you?							
List all of you identify what to possible, list to Part 1. If more (For an explanation)	type of claim it is. If a claim the claims in alphabetical or e than one creditor holds a	ms. If a creditor has more than one priority has both priority and nonpriority amounts, rder according to the creditor's name. If you particular claim, list the other creditors in P n, see the instructions for this form in the instructions.	list that claim here u have more than lart 3.	and show bot	th priority secured o	and nonprid	ority amoui	nts. As mı	uch as Page of Prity
2. List all of you identify what to possible, list to Part 1. If more (For an explanation) 2.1	type of claim it is. If a claim the claims in alphabetical or e than one creditor holds a	has both priority and nonpriority amounts, rder according to the creditor's name. If you particular claim, list the other creditors in P n, see the instructions for this form in the instructions.	list that claim here u have more than art 3. struction booklet.)	and show bot two priority un: Total claim	th priority secured o	and nonprice laims, fill or priority amount	ority amoui	nts. As mu tinuation F Nonprio amount	uch as Page of Prity
2. List all of you identify what to possible, list to Part 1. If more (For an explanation of the Part 1.) Internal Inte	type of claim it is. If a claim the claims in alphabetical or e than one creditor holds a nation of each type of claim Revenue Service ditor's Name	has both priority and nonpriority amounts, rder according to the creditor's name. If you particular claim, list the other creditors in P	list that claim here I have more than lart 3. struction booklet.)	e and show bot two priority un	th priority secured o	and nonprice laims, fill or priority amount	ority amoui the Conf	nts. As mu tinuation F Nonprio amount	ach as Page of Pritty
2. List all of you identify what to possible, list to Part 1. If more (For an explanation of the Part 1.) Internal Inte	type of claim it is. If a claim the claims in alphabetical or e than one creditor holds a nation of each type of claim Revenue Service ditor's Name type Notices 7346	has both priority and nonpriority amounts, rder according to the creditor's name. If you particular claim, list the other creditors in P in, see the instructions for this form in the instructions for the ins	list that claim here I have more than lart 3. struction booklet.)	and show bot two priority un: Total claim \$ 2014 unfile	th priority secured o	and nonprice laims, fill or priority amount	ority amoui the Conf	nts. As mu tinuation F Nonprio amount	ach as Page of Pritty
2. List all of you identify what to possible, list to Part 1. If more (For an explanation of the Part 1.) Internal Inte	type of claim it is. If a claim the claims in alphabetical or e than one creditor holds a nation of each type of claim Revenue Service ditor's Name type Notices 7346 phia, PA 19101-7346	has both priority and nonpriority amounts, rder according to the creditor's name. If you particular claim, list the other creditors in P in, see the instructions for this form in the instructions for the ins	list that claim here a have more than lart 3. struction booklet.) 7 2013 and 2 personal	Total claim \$ 2014 unfile	th priority secured o	and nonprice laims, fill or priority amount	ority amoui the Conf	nts. As mu tinuation F Nonprio amount	ach as Page of Pritty
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2. List all of you identify what it possible, list it Part 1. If more (For an explain an explain and it Priority Created Bankrup PO Box 7 Philadelp Number Street Who incurry Debtor 1 Debtor 2	type of claim it is. If a claim the claims in alphabetical or e than one creditor holds a nation of each type of claim Revenue Service ditor's Name type of the claim type of claim ty	has both priority and nonpriority amounts, rder according to the creditor's name. If you particular claim, list the other creditors in P in, see the instructions for this form in the instructions for the instructions	list that claim here I have more than lart 3. struction booklet.) T 2013 and 2 personal 7 n is: Check all the	Total claim \$ 2014 unfile	th priority secured o	and nonprice laims, fill or priority amount	ority amoui the Conf	nts. As mu tinuation F Nonprio amount	ach as Page of Pritty
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2. List all of you identify what it possible, list it Part 1. If more (For an explain an explain and it Part 1. If more (For an explain and it Priority Cree Bankrup PO Box 7 Philadely Number Street Who incurred Debtor 1 Debtor 2 Debtor 1 At least 0 Check if community is the claim	type of claim it is. If a claim the claims in alphabetical or e than one creditor holds a nation of each type of claim Revenue Service ditor's Name atcy Notices 7346 phia, PA 19101-7346 eet City State ZIp Code red the debt? Check one. I only 2 only I and Debtor 2 only one of the debtors and another this claim is for a redeted to the claim is for a redete	has both priority and nonpriority amounts, rder according to the creditor's name. If you particular claim, list the other creditors in P in, see the instructions for this form in the in: Last 4 digits of account number When was the debt incurred? As of the date you file, the claim Contingent Unliquidated Disputed ther Type of PRIORITY unsecured companies and the particular contents are presented to the particular and the provided them.	list that claim here I have more than lart 3. struction booklet.) T 2013 and 2 personal 7 n is: Check all the	Total claim S 2014 unfile Faxes at apply	th priority secured o	and nonprice laims, fill or priority amount	ority amoui the Conf	nts. As mu tinuation F Nonprio amount	ach as Page of Pritty

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

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Precautionary

4.2	■ No □ Yes Eyecare Center of Salem, LLC Priority Creditor's Name Patient Accounts 660 Capital Street, NE	☐ Debts to pension or profit-s			*	74.00
4.2	□ Yes Eyecare Center of Salem, LLC	☐ Debts to pension or profit-s ☐ Other. Specify Mi	sc. Consumer Debt		 \$	74.00
	_	☐ Debts to pension or profit-s		3		
	■ No	_ ' ' '	haring plans, and other similar debts	S		
		not report as priority claims				
	Is the claim subject to offset?	Obligations arising out of a not report as priority claims				
	☐ Check if this claim is for a community debt	☐ Student loans				
	At least one of the debtors and another	Type of NONPRIORITY unser	curea ciaim:			
	■ Debtor 1 and Debtor 2 only	Disputed	arrad alaim.			
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 only	—				
	Who incurred the debt? Check one.	☐ Contingent				
	Sioux Falls, SD 57117 Number Street City State Zlp Code	As of the date you file, the cl	aim is: Check all that apply			
	Bankruptcy Department PO Box 6248	When was the debt incurred	Pecember 2000			
4.1	Citibank Priority Creditor's Name	Last 4 digits of account num	ber		\$	4,598.00
	Part 2.	oner creditors in Part 3.if you have	more man unee nonphority unsecure	ou cidiiiiS IIII (Total cla	ū
4.	Yes. List all of your nonpriority unsecured claims is unsecured claim, list the creditor separately for e than one creditor holds a particular claim, list the	ach claim. For each claim listed, ider	ntify what type of claim it is. Do not lis	st claims alre	ady included in I	Part 1. If more
	☐ No. You have nothing to report in this part. So		other schedules.			
	Do any creditors have nonpriority unsecured					
Part 2	2: List All of Your NONPRIORITY Unse		,			
		Other. Specify Preca	utionary			
	☐ Yes	Claims for death or personal inju	ury while you were intoxicated			
	■ No	Taxes and certain other debts you	· ·			
	Is the claim subject to offset?	Domestic support obligations				
	☐ At least one of the debtors and another☐ Check if this claim is for a community debt	Type of PRIORITY unsecured claim	m:			
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	Debtor 2 only	☐ Unliquidated				
	Who incurred the debt? Check one. ☐ Debtor 1 only	☐ Contingent				
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply			
	Priority Creditor's Name Bankruptcy Notice Dept. 955 Center Street, NE Salem, OR 97301-2555	When was the debt incurred?	2013 and 2014 unfiled personal Taxes	_		
	Oregon Department Of Revenue	Last 4 digits of account number	\$ 0.0	0 \$	0.00 \$	\$0.00
2.2						

Official Form 106 E/F Schedule E/F: Creditors Who Have Unsecured Claims

Page 2 of 6

	Meta Ann Bybee Vance Bybee		Case number (if know)	
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only			
	☐ At least one of the debtors and another	ed claim:		
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a sep not report as priority claims	aration agreement or divorce that you did	
	■ No	Debts to pension or profit-shar	ng plans, and other similar debts	
	Yes	■ Other. Specify Misc	Medical Service	
4.3	Hope Orthopedics of Oregon	Last 4 digits of account number	1530	\$ 350.00
	Priority Creditor's Name Patient Accounts 1600 State Street	When was the debt incurred?	April 2013	
	Salem, OR 97301 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one. □ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:	
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a sep not report as priority claims	aration agreement or divorce that you did	
	■ No	☐ Debts to pension or profit-shar	ng plans, and other similar debts	
	Yes	■ Other. Specify Misc	Medical Service	
4.4	James M. Eyre, Jr., DMD MD	Last 4 digits of account number		\$ 94.00
	Priority Creditor's Name 250 Church Street, SE, Suite 102	When was the debt incurred?	January 2010	
-	Salem, OR 97301 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only	—		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:	
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a sep not report as priority claims	aration agreement or divorce that you did	
	No	☐ Debts to pension or profit-shar	ng plans, and other similar debts	
	Yes	Other. Specify	Medical Service	
4.5	Providence Home Services	Last 4 digits of account number	4608	\$ 46.00

Priority Creditor's Name

Official Form 106 E/F

Debtor Debtor	1 Meta Ann Bybee 2 Vance Bybee			Case number (if know)	
	PO Box 5936A Portland, OR 97228	When was the debt incurr	ed?	2012	
	Number Street City State Zlp Code	As of the date you file, the	claim	s: Check all that apply	
	Who incurred the debt? Check one. ☐ Debtor 1 only	☐ Contingent			
	□ Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY un	secure	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	Obligations arising out on ot report as priority claims	of a sepa	aration agreement or divorce that you did	
	■ No	Debts to pension or prof	it-sharir	g plans, and other similar debts	
	Yes	Other. Specify	Home	Medical Equipment	
4.6	Robin L. Perez, PMHNP	Last 4 digits of account no	umber		\$ 164.00
	Priority Creditor's Name 550 NW 3rd Avenue, East	When was the debt incurr	ed?	2008	
	Canby, OR 97013 Number Street City State Zlp Code	As of the date you file, the	claim	s: Check all that apply	
	Who incurred the debt? Check one. ☐ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY un	secure	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	Obligations arising out on ot report as priority claims	of a sepa	aration agreement or divorce that you did	
	■ No	Debts to pension or prof			
	Yes	Other. Specify	Misc.	Consumer Debt	
4.7	Salem Hospital	Last 4 digits of account n	umber	5990	\$ 536.00
	Priority Creditor's Name Patient Accounts PO Box 6990	When was the debt incurr	ed?	July 2014	
-	Portland, OR 97228-6990 Number Street City State Zlp Code	As of the date you file, the	claim	s: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent			
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY un	secure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out on ot report as priority claims	of a sepa	aration agreement or divorce that you did	
	■ No		it-sharir	g plans, and other similar debts	
	Yes	Other. Specify	Misc.	Medical Service	

Official Form 106 E/F

Debtor 1 Meta Ann Bybee Debtor 2 Vance Bybee		Case number (if know)	
4.8 Silver Falls Dermatology	Last 4 digits of account number	7198	\$ 208.00
Priority Creditor's Name Patient Accounts 1793 13th Street, SE Salem, OR 97302	When was the debt incurred?	2012	
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one. ☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community debt	☐ Student loans		
Is the claim subject to offset?	☐ Obligations arising out of a sepanot report as priority claims	aration agreement or divorce that you did	
■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	■ Other. Specify Misc.	Medical Service	
more than one creditor for any of the debts that yo any debts in Parts 1 or 2, do not fill out or submit to Name Address AcctCorp International of Salem 3700 River Road, Nort, Suite 7 Salem, OR 97303	his page. On which entry in Part 1 or Line 4.2 of (Check one):	Part2 did you list the original o □ Part 1: Creditors with Priority ■ Part 2: Creditors with Nonpr	creditor? y Unsecured Claims
	Last 4 digits of account nur	nber 8455	
Name Address Americollect, Inc PO Box 1566 Manitowoc, WI 54221-1566	On which entry in Part 1 or Line 4.7 of (Check one):	Part2 did you list the original o ☐ Part 1: Creditors with Priority ■ Part 2: Creditors with Nonpr	/ Unsecured Claims
Wantowoc, W1 34221-1300	Last 4 digits of account nur	nber 6089	
Name Address Columbia Collection Service 10888 SE Main Street, Suite 200 PO Box 22709 Milwaukie, OR 97222	Line <u>4.5</u> of (<i>Check one</i>):	Part2 did you list the original of Deart 1: Creditors with Priority Part 2: Creditors with Nonpri	/ Unsecured Claims
	Last 4 digits of account nur	niber	
Name Address IC System Inc. PO Box 64378 Saint Paul, MN 55164	On which entry in Part 1 or Line 4.6 of (Check one):	Part2 did you list the original of ☐ Part 1: Creditors with Priority ■ Part 2: Creditors with Nonpr	/ Unsecured Claims
	Last 4 digits of account nur	nber	
Name Address Professional Credit Service Bankruptcy Notices 400 International Way Springfield, OR 97477	Line 4.3 of (Check one):	Part2 did you list the original o □ Part 1: Creditors with Priority ■ Part 2: Creditors with Nonpr	/ Unsecured Claims
	Last 4 digits of account nur	nber 8710	
Name Address Professional Credit Service Bankruptcy Notices 400 International Way Springfield, OR 97477	On which entry in Part 1 or Line 4.8 of (Check one):	Part2 did you list the original o ☐ Part 1: Creditors with Priority ■ Part 2: Creditors with Nonpr	/ Unsecured Claims

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 5 of 6

Debtor 1	Meta Ann Bybee
Debtor 2	Vance Bybee

	Case	number	(if know)	
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Last 4 digits of account number

Name Address Quick Collect, Inc. PO Box 55457 Portland, OR 97238 On which entry in Part 1 or Part2 did you list the original creditor?

Line <u>4.4</u> of (*Check one*): ☐ Part 1: Creditors with Priority Unsecured Claims

■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total	claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total. Add lines 6a through 6d.	6e.	\$	0.00
				Total Cla	im
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	6,070.00
	6j.	Total. Add lines 6f through 6i.	6j.	\$	6,070.00

Fill in this infor	mation to identify your	case:		
Debtor 1	Meta Ann Bybee			
	First Name	Middle Name	Last Name	
Debtor 2	Vance Bybee			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF OREGON		
Case number (if known)				Charle if this is an
(II KIIOWII)				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the , Street, City, State and ZIP	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.2					<u></u>
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.4	,				
	Name				_
	Number	Street			_
	0''			710.0	
2.5	City		State	ZIP Code	
2.0	Name				
	Number	Street			_
			<u> </u>	710.0	_
	City		State	ZIP Code	

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Fill in this info	ormation to identify your	case:			
Debtor 1					
Debior 1	Meta Ann Bybee First Name	Middle Name	Last Name		
Debtor 2	Vance Bybee				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States I	Bankruptcy Court for the:	DISTRICT OF OREGON	N .		
Case number (if known)					☐ Check if this is an amended filing
Schedul	orm 106H e H: Your Cod				12/15
people are filir fill it out, and r	ng together, both are equ number the entries in the	ally responsible for supp	olying correct informanthe the Additional Page	ition. If more space is n	ate as possible. If two married needed, copy the Additional Page, no of any Additional Pages, write
1. Do you	have any codebtors? (If	you are filing a joint case,	do not list either spous	e as a codebtor.	
■ No					
☐ Yes					
	alifornia, Idaho, Louisiana,	u lived in a community pr , Nevada, New Mexico, Pu			y states and territories include
_		use, or legal equivalent live	e with you at the time?		
in line 2 a Form 106 fill out Co	gain as a codebtor only i D), Schedule E/F (Official	if that person is a guaran	tor or cosigner. Make	e sure you have listed the office of the sure you have listed the office of the sure of th	g with you. List the person shown to creditor on Schedule D (Official Schedule E/F, or Schedule G to ditor to whom you owe the debt
	, Number, Street, City, State and Zl	IP Code		Check all schedule	
3.1				Schedule D, line	e
Name	3			☐ Schedule E/F, li ☐ Schedule G, line	
Numb City	per Street	State	ZIP Code	_	
3.2				☐ Schedule D, line)
Name				☐ Schedule E/F, line ☐ Schedule G, line	ne
Numb	per Street			_	
City		State	ZIP Code		

Fill	in this information to identify your	case:				1			
	otor 1 Meta Ann B								
	otor 2 Vance Bybe	ee							
Uni	ted States Bankruptcy Court for the	e: DISTRICT OF OREG	ON						
	se number 		-			Check if this is: An amende A supplement	ed filing ent showi		
\bigcirc	fficial Form 106l							following date:	
	chedule I: Your Inc					MM / DD/ Y	YYY		12/15
sup spo atta	as complete and accurate as posplying correct information. If you use. If you are separated and you che a separate sheet to this form. Describe Employment	i are married and not fili ur spouse is not filing w On the top of any additi	ng jointly, and your ith you, do not inclu	spouse ude infor	is li mati	ing with you, incl on about your sp	lude info ouse. If r	rmation abou nore space is	t your needed,
1.	Fill in your employment								
•	information.		Debtor 1			_		filing spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed□ Not employed			☐ Emplo	•		
	employers.	Occupation	Registered Nur	se					
	Include part-time, seasonal, or self-employed work.	Employer's name	Kaiser Permane	ente					
	Occupation may include student or homemaker, if it applies.	Employer's address	c/o Kaiser Four Hospitals 2701 NW Vaugh Portland, OR 97	nn, Suite	e 49	0			
		How long employed t	here? 1.5 Yea	ars					
Par	t 2: Give Details About Mo	nthly Income							
	mate monthly income as of the cuse unless you are separated.	late you file this form. If	you have nothing to	report for	any	line, write \$0 in the	e space. I	nclude your no	n-filing
	u or your non-filing spouse have me space, attach a separate sheet to		ombine the information	on for all	emp	oyers for that perso	on on the	lines below. If	you need
						For Debtor 1		ebtor 2 or ling spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	10,060.00	\$	0.00	
3.	Estimate and list monthly over	time pay.		3.	+\$	0.00	+\$	0.00	
4.	Calculate gross Income. Add I	ne 2 + line 3.		4.	\$	10,060.00	\$	0.00	

Official Form 106I Schedule I: Your Income page 1

Case number (if known)

				- 1	For Deb	otor 1			r Debtor		
	_								n-filing s	•	
	Сору	/ line 4 here	4.	;	\$	10,060	.00	\$_		0.00	_
5.	Lista	all payroll deductions:									
٥.		Tax, Medicare, and Social Security deductions	Fo		c	2 050		Ф		0.00	
	5a. 5b.	Mandatory contributions for retirement plans	5a. 5b.		\$ \$	2,850		\$_ \$		0.00	_
		Voluntary contributions for retirement plans			φ \$.00	φ_			_
	5c. 5d.	Required repayments of retirement fund loans	5c. 5d.		φ \$.00	φ_		0.00	_
	5u. 5e.	Insurance	5u. 5e.		φ \$.00	\$_		0.00	_
	5e. 5f.	Domestic support obligations	5e. 5f.		φ \$.00	\$_		0.00	_
					·		.00			0.00	_
	5g.	Union dues	5g.		\$.00	. \$_		0.00	_
	5h.	Other deductions. Specify:	5h.		\$.00			0.00	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	<u> </u>	3,150	.00	\$_		0.00	=
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	<u> </u>	6,910	.00	\$_		0.00	_
8.	List a 8a.	All other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	9	\$	0	.00	\$		0.00	
	8b.	Interest and dividends	8b.		\$.00	\$		0.00	_
	8c.	Family support payments that you, a non-filing spouse, or a dependence regularly receive Include alimony, spousal support, child support, maintenance, divorce	nt		·			-			_
		settlement, and property settlement.	8c.		\$.00	\$_		0.00	_
	8d.	Unemployment compensation	8d.		\$.00	\$_		0.00	_
	8e.	Social Security	8e.	,	\$	0	.00	\$_		0.00	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$.00	\$_		0.00	_
	8g.	Pension or retirement income	8g.	9	\$	0	.00	\$_		0.00	_
	8h.	Other monthly income. Specify:	8h.	+ 3	\$	0	.00	+ \$		0.00	_
9.	Add :	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		0	.00	\$		0.0	n
-			_	Ľ				Ľ-			<u> </u>
10.	Calc	ulate monthly income. Add line 7 + line 9.	10.	\$	6,91	10.00	+ \$		0.00	= \$	6,910.00
	Add t	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		_	-,-		-			-	-,
11.	Include other	e all other regular contributions to the expenses that you list in Schedular de contributions from an unmarried partner, members of your household, your friends or relatives. of include any amounts already included in lines 2-10 or amounts that are notify:	ur depe		-				Schedul	le J. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rethat amount on the Summary of Schedules and Statistical Summary of Celes								\$	6,910.00
										Combi	
13.	Do yo	ou expect an increase or decrease within the year after you file this for No.								month	ly income
		Yes. Explain: Because, Mr. Bybee hopes to find a job and ret	urn to	wo	rk.						

Official Form 106I Schedule I: Your Income page 2

Fill	in this informa	ation to identify ye	our case:			Ī		
Deb	Debtor 1 Meta Ann Bybee					Check if this is:		
	ebtor 2 Vance Bybee Spouse, if filing)						wing postpetition chapter the following date:	
``		runtou Court for the	DISTRI	CT OF OREGON			MM / DD / YYYY	
		upicy Count for the.	DISTRI	CT OF OREGON			IVIIVI / DD / TTTT	
	e number nown)							
		orm 106J	_					
		J: Your			ro filing togothor l	both are an	wally recognished	12/15
info	ormation. If m		eded, atta	. If two married people a nch another sheet to this n.				
Par		ribe Your House	hold					
1.	Is this a joir ☐ No. Go to							
	_		in a separ	ate household?				
	■ N □ Y	-	st file Offic	ial Form 106J-2, <i>Expense</i>	es for Separate Hous	sehold of De	ebtor 2.	
2.	Do you have	e dependents?	■ No					
	Do not list D and Debtor 2		☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state dependents							□ No
	иерепиетка	names.						□ Yes □ No
								Yes
								□ No □ Yes
								□ No
3.	Do your ove	penses include	_					☐ Yes
Э.	expenses o	of people other to d your depende	han $_{\square}$	No Yes				
		ate Your Ongoi						
exp	imate your ex enses as of a plicable date.	a date after the l	our bankr bankrupto	uptcy filing date unless y is filed. If this is a sup	you are using this t plemental <i>Schedul</i>	form as a s le <i>J</i> , check	supplement in a Ch the box at the top	apter 13 case to report of the form and fill in the
				government assistance cluded it on Schedule I:				
(Of	ficial Form 10	061.)					Your exp	enses
4.		or home owners		ses for your residence. or lot.	Include first mortgaç	ge 4.	\$	2,200.00
	If not includ	ded in line 4:						
	4a. Real e	estate taxes				4a.	\$	0.00
		erty, homeowner's				4b.	·	0.00
		e maintenance, re eowner's associat		upkeep expenses dominium dues		4c. 4d.	·	100.00 15.00
5.				our residence, such as he	ome equity loans	5.	·	0.00

	eta Ann Bybee			
otor 2 Va	nce Bybee C	ase num	ber (if know	/n)
Utilities:				
	ectricity, heat, natural gas	6a.	\$	240.00
6b. Wa	ater, sewer, garbage collection	6b.	\$	150.00
	lephone, cell phone, Internet, satellite, and cable services	6c.	\$	300.00
	ner. Specify: Security Service / Pest Control	6d.	\$	85.00
	d housekeeping supplies		\$	600.00
	e and children's education costs	8.	\$	0.00
	, laundry, and dry cleaning	9.	\$	160.00
_	care products and services	10.	·	150.00
	and dental expenses	11.		120.00
	rtation. Include gas, maintenance, bus or train fare.		Ψ	
	clude car payments.	12.	\$	400.00
	nment, clubs, recreation, newspapers, magazines, and books	13.	\$	150.00
	le contributions and religious donations	14.	· · · · · · · · · · · · · · · · · · ·	600.00
Insuranc	-		·	000.00
	clude insurance deducted from your pay or included in lines 4 or 20.			
	e insurance	15a.	\$	50.00
	alth insurance	15b.	·	0.00
	hicle insurance	15c.		300.00
	ner insurance. Specify:	15d.	· —	0.00
	o not include taxes deducted from your pay or included in lines 4 or 20.		· —	0.00
Specify:	o not morado taxos doddotod nom your pay or moradod in inios 4 or 25.	16.	\$	0.00
	ent or lease payments:	_	· —	0.00
	r payments for Vehicle 1	17a.	\$	240.00
	r payments for Vehicle 2	17b.	\$	0.00
	ner. Specify:	17c.	\$	0.00
	ner. Specify:	17d.	·	0.00
	ments of alimony, maintenance, and support that you did not report as		Ť —	0.00
	I from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
	yments you make to support others who do not live with you.		\$	0.00
Specify:		19.		
Other rea	al property expenses not included in lines 4 or 5 of this form or on Sched	lule I: Y	our Incon	ne.
	ortgages on other property	20a.		0.00
20b. Re	al estate taxes	20b.	\$	0.00
20c. Pro	operty, homeowner's, or renter's insurance	20c.	\$	0.00
	intenance, repair, and upkeep expenses	20d.	\$	0.00
	meowner's association or condominium dues	20e.	\$	0.00
Other: S		21.	·	50.00
00	1 Ct Expense		-Ψ	30.00
	e your monthly expenses			
	lines 4 through 21.		\$	5,910.00
22b. Cop	y line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c. Add	line 22a and 22b. The result is your monthly expenses.		\$	5,910.00
				5,5 : 5:50
	e your monthly net income.		_	
	py line 12 (your combined monthly income) from Schedule I.	23a.		6,910.00
23b. Co	py your monthly expenses from line 22c above.	23b.	-\$	5,910.00
				·
	btract your monthly expenses from your monthly income.	00-	e	1,000.00
Th	e result is your <i>monthly net income</i> .	23c.	\$	1,000.00
For examp	expect an increase or decrease in your expenses within the year after you le, do you expect to finish paying for your car loan within the year or do you expect your moin to the terms of your mortgage?			crease or decrease because of a
■ No. □ Yes.	Fundain house			
	Explain here:			

Fill in this information to identify your case:						
Debtor 1	Meta Ann Bybee					
	First Name	Middle Name	Last Name			
Debtor 2	Vance Bybee					
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		DISTRICT OF OREGON				
Case number						
(if known)				☐ Check if this is an		
				amended filing		

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is	NOT an attorney to help you fill out bankruptcy forms?
■ No	
Yes. Name of person	. Attach Bankruptcy Petition Preparer's Notice, Declaration and Signature (Official Form 119).
hat they are true and correct. X /s/ Meta Ann Bybee	read the summary and schedules filed with this declaration and X /s/ Vance Bybee
that they are true and correct.	

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

Fill in this info	rmation to identify you	r case:					
Debtor 1	Meta Ann Bybee						
DCDIOI 1	First Name	Middle Name	Last Name				
Debtor 2	Vance Bybee First Name	Middle None	Lost Name				
(Spouse if, filing)		Middle Name	Last Name				
United States B	ankruptcy Court for the:	DISTRICT OF OREGON					
Case number (if known)				-	heck if this is an mended filing		
Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.							
Part 1: Give	Details About Your Ma	rital Status and Where You	Lived Before				
1. What is yo	ur current marital statu	ıs?					
■ Marrie □ Not ma							
2. During the	last 3 years, have you	lived anywhere other than	where you live now?				
■ No □ Yes. L	ist all of the places you l	ived in the last 3 years. Do no	ot include where you live nov	v.			
Debtor 1 F	Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there		
				nity property state or territor ico, Texas, Washington and W			
■ No □ Yes. M	Nake sure you fill out <i>Scl</i>	hedule H: Your Codebtors (O	fficial Form 106H).				
Part 2 Expla	ain the Sources of You	r Income					
4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.							
□ No							
■ Yes. F	ill in the details.						
		Debtor 1		Debtor 2			
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)		
	1 of current year until ed for bankruptcy:	■ Wages, commissions, bonuses, tips	\$107,837.00	☐ Wages, commissions, bonuses, tips	\$0.00		
		☐ Operating a business		☐ Operating a business			

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

			Debtor 1					Debtor 2		
					income e deductions a ions)	and	Sources of income Check all that apply.		Gross income (before deductions and exclusions)	
For last cale (January 1 to	endar year: o December	31, 2014)	■ Wages, bonuses, ti	commissions, ps		\$0	.00	■ Wages, com bonuses, tips	missions,	\$65,484.00
			☐ Operation	ng a business				☐ Operating a	ousiness	
	ndar year be o December		■ Wages, bonuses, ti	commissions,		\$24,891	.00	■ Wages, com bonuses, tips	missions,	\$83,155.00
			☐ Operati	ng a business				☐ Operating a	ousiness	
List each		he gross inco			•	,		ved together, list at you listed in lin	·	under Debtor 1.
			Debtor 1					Debtor 2		
			Sources of Describe be			income e deductions a ions)	and	Sources of inconstruction Describe below.		Gross income (before deductions and exclusions)
For last cale (January 1 to	endar year: o December	31, 2014)				\$0	.00	Unemployme	nt	\$4,392.00
	er Debtor 1's Neither De	or Debtor 2 btor 1 nor D	's debts prir Debtor 2 has		er debts? sumer deb	ts. Consume	r debts	are defined in 11	U.S.C. § 10	n1(8) as "incurred by an
		•	•	mily, or househo or bankruptcy, d	• •		a total	of \$6,225* or mo	re?	
	□ No.	Go to line 7	before you filed for bankruptcy, did you pay any creditor a total of \$6,225* or more? ne 7.							
	☐ Yes	paid that cr	elow each creditor to whom you paid a total of \$6,225* or more in one or more payments and the total amount you nat creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do clude payments to an attorney for this bankruptcy case.							
	* Subject						led on o	or after the date of	of adjustmen	t.
■ Yes		Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?								
	■ No.	Go to line 7	7.							
	□ Yes	include pay		mestic support o						at creditor. Do not include payments to
Credito	r's Name and	l Address		Dates of payme	ent	Total amou		Amount you still owe	Was this p	payment for

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debt		Vance Bybee		Cas	e number (if known)		
i	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? <i>Insiders</i> include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.						
]]	■ No □ Yes. List all payments to an insider						
	Insid	ler's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	his payment
i	nside nclud	n 1 year before you filed for bankrupter? le payments on debts guaranteed or cos		•	any property on a	ccount of a de	bt that benefited ar
		Yes. List all payments to an insider					
		ler's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	his payment tor's name
Part	4:	Identify Legal Actions, Repossession	ns, and Foreclosures	•			
l 1	List al nodifi □ N	n 1 year before you filed for bankrupt Il such matters, including personal injury ications, and contract disputes. No Yes, Fill in the details					
·	Yes. Fill in the details. Case title		Nature of the case			Status of the case	
		e number	radial of the base	obuit of agonoy			
	Meta	ech Financial vs Vance and a Bybee 05000023	Non Judicial Foreclosure	Polk County		■ Pending □ On appea □ Conclude	
	Check ■ N	n 1 year before you filed for bankrupt and that apply and fill in the details below. No Yes. Fill in the information below.			oreclosed, garnis Date	shed, attached	, seized, or levied? Value of the property
		n 90 days before you filed for bankru unts or refuse to make a payment bec	ptcy, did any creditor, inc		nancial institution	n, set off any a	mounts from your
	_	No Yes. Fill in the details.					
	Cred	or Name and Address Describe the action the creditor to			Date :	action was	Amount
		n 1 year before you filed for bankrupt -appointed receiver, a custodian, or a		rty in the possess	ion of an assigne	e for the bene	fit of creditors, a
 	_	No ⁄es					

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	btor 1 Meta Ann Bybee btor 2 Vance Bybee	Case n	umber (if known)					
Pa	rt 5: List Certain Gifts and Contributions	3						
13.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ■ No							
	Yes. Fill in the details for each gift. Gifts with a total value of more than \$600	Describe the gifts	Dates you gave	Value				
	per person	besonible the girls	the gifts	Value				
	Person to Whom You Gave the Gift and Address:							
14.	□ No	ptcy, did you give any gifts or contributions with	h a total value of more than	\$600 to any charity				
	Yes. Fill in the details for each gift or co		D.					
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		Dates you contributed	Value				
	Church of Jesus Christ of Latter Day STs	y Monthly	Monthlyq	\$400.00				
Pa	rt 6: List Certain Losses							
15.	Within 1 year before you filed for bankrup disaster, or gambling?	otcy or since you filed for bankruptcy, did you lo	se anything because of the	ft, fire, other				
	■ No							
	Yes. Fill in the details.							
		Describe any insurance coverage for the loss	Date of your	Value of property				
	how the loss occurred	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/Property.	loss	lost				
Pa	rt 7: List Certain Payments or Transfers							
16.	consulted about seeking bankruptcy or p	otcy, did you or anyone else acting on your beha reparing a bankruptcy petition? eparers, or credit counseling agencies for services		rty to anyone you				
	□ No							
	Yes. Fill in the details.							
	Person Who Was Paid Address Email or website address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment				
	Person Who Made the Payment, if Not Yo Michael D. O'Brien, & Associates, P. 12909 SW 68th Parkway, Suite 160 Portland, OR 97223 Debtor		11/24/2015	\$1,100.00				
17.	Within 1 year before you filed for bankrup	otcy, did you or anyone else acting on your beha itors or to make payments to your creditors? you listed on line 16.	If pay or transfer any prope	rty to anyone who				
	■ No							
	Yes. Fill in the details.							
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment				
10	Within 2 years before you filed for bearing	intov did you call trade or attending to a first		r than property				
		ptcy, did you sell, trade, or otherwise transfer a ement of Financial Affairs for Individuals Filing for Bank		er than property page 4				

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Best Case Bankruptcy

	transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.				
	Person Who Received Transfer Address	Description and v property transfer		Describe any property of payments received or d paid in exchange	
	Person's relationship to you				
19.	Within 10 years before you filed for bankrupto beneficiary? (These are often called asset-prote No Yes. Fill in the details.				
	Name of trust	Description and v	alue of the prope	erty transferred	Date Transfer was
					made
Par	t 8: List of Certain Financial Accounts, Instr	uments, Safe Deposi	t Boxes, and Sto	rage Units	
20.	Within 1 year before you filed for bankruptcy,	were any financial ac	counts or instru	ments held in your name, o	or for your benefit, closed,
	sold, moved, or transferred?	•		•	
	Include checking, savings, money market, or houses, pension funds, cooperatives, associa No Yes. Fill in the details.				s, credit unions, prokerage
		ast 4 digits of	Type of accoun	it or Date account wa	as Last balance
		ccount number	instrument	closed, sold, moved, or transferred	before closing or transfer
21.	Do you now have, or did you have within 1 yearsh, or other valuables?	ar before you filed for	r bankruptcy, any	safe deposit box or other	depository for securities,
	■ No □ Yes. Fill in the details.				
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)		Who else had access to it? Address (Number, Street, City, State and ZIP Code)		Do you still have it?
22.	Have you stored property in a storage unit or	place other than your	home within 1 y	ear before you filed for ba	nkruptcy
	■ No □ Yes. Fill in the details.				
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or it to it? Address (Number, State and ZIP Code)		Describe the contents	Do you still have it?
Par	t 9: Identify Property You Hold or Control fo	or Someone Else			
	Do you hold or control any property that some for someone.		ude any property	you borrowed from, are s	toring for, or hold in trust
	■ No				
	Yes. Fill in the details.				
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe the property	Value
Par	t 10: Give Details About Environmental Infor	,			

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 Meta Ann Bybee Debtor 2 Vance Bybee

Case number (if known)

-	to own, operate, or utilize it, including disposal sites.								
Rep	ort all notices, releases, and proceedings the	at you know about, regardless of when t	hey occurred.						
24.	Has any governmental unit notified you that	t you may be liable or potentially liable u	nder or in violation of an environr	mental law?					
	■ No								
	Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
25.	Have you notified any governmental unit of								
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No Yes. Fill in the details.								
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	ature of the case	Status of the case					
Par	t 11: Give Details About Your Business or	Connections to Any Business							
27.	Within 4 years before you filed for bankrupt	cy, did you own a business or have any	of the following connections to ar	ny business?					
	☐ A sole proprietor or self-employed in	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time							
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)								
	☐ A partner in a partnership								
	☐ An officer, director, or managing executive of a corporation								
	☐ An owner of at least 5% of the voting	☐ An owner of at least 5% of the voting or equity securities of a corporation							
	■ No. None of the above applies. Go to F	Part 12.							
	_	in the details below for each business.							
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN.						
			Dates business existed						
28.	. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.								

Part 12: Sign Below

No

Name

Address

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy

Date Issued

☐ Yes. Fill in the details below.

(Number, Street, City, State and ZIP Code)

Debtor 2	_		Case number (if known)			
	ankruptcy case can result in fir c. §§ 152, 1341, 1519, and 3571.		risonment for up to 20 years, or both.			
/s/ Met	a Ann Bybee	/s/ Var	nce Bybee			
Meta A	nn Bybee	Vance	Bybee			
Signatu	re of Debtor 1	Signati	ire of Debtor 2			
Date	December 9, 2015	Date	December 9, 2015			
Did you	attach additional pages to You	r Statement of Financial A	Iffairs for Individuals Filing for Bankruptcy (Official Form 107)?			
■ No						
☐ Yes						
Did you	pay or agree to pay someone v	ho is not an attorney to h	elp you fill out bankruptcy forms?			
■ No						
☐ Yes. I	Name of Person Attach t	he <i>Bankruptcy Petition Pre</i> p	parer's Notice, Declaration, and Signature (Official Form 119).			